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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

10824529

Fee
Sheet
2**CLAIMS AS FILED - PART I**

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)
BASIC FEE (37 CFR 1.18(a))		
TOTAL CLAIMS (37 CFR 1.18(c))	18 minus 20 =	0
INDEPENDENT CLAIMS (37 CFR 1.18(b))	1 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))		

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

RATE	FEE
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	770
X \$	=
X \$	=
+ \$	= 290
TOTAL	1060

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
AMENDMENT A			
Total (37 CFR 1.18(c))	* 9	Minus ** 20	= 0
Independent (37 CFR 1.18(b))	* 1	Minus *** 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
AMENDMENT B			
Total (37 CFR 1.18(c))	*	Minus **	=
Independent (37 CFR 1.18(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
AMENDMENT C			
Total (37 CFR 1.18(c))	*	Minus **	=
Independent (37 CFR 1.18(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

101824574

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	11	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	18 minus 20 =	0
INDEPENDENT CLAIMS	1 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	4-14-04	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	11	Minus	20
Independent	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
XS 9=		OR	XS 18=	
X43=		OR	X85=	
+145=		OR	+290=	290
TOTAL		OR	TOTAL	1060

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
XS 9=		OR	XS 18=	
X43=		OR	X85=	
+145=		OR	+290=	
TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
25.00		OR	50.00	
XS 9=		OR	XS 18=	
100.00		OR	200.00	
X43=		OR	X85=	
+145=		OR	+290=	
TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
XS 9=		OR	XS 18=	
X43=		OR	X85=	
+145=		OR	+290=	
TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

12/29/05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	7	Minus	20
Independent	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

7/14/06

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	9	Minus	20
Independent	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.
 * If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".
 * If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".
 * The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.